1b. PHA code					
1. MTW Agency 1a. Agency name 1b. PHA code 1c. Program 1c. Program 1c. Project number (Public Housing only) 1c. Building number (Public Housing only) 1c. MTW Action 2a. Type of action 1 = New Admission 2a. Type of action 2a. Type of action 2a. Type of action 2a. Type of action 2b. Portability Move-in 5 = Portability Move-in 5 = Portability Move-in 5 = Portability Move-in 6 = End Participation 7 = Other Change of Unit 3 = Interim Reexamination 7 = Other Change of Unit 3 = Interim Reexamination 7 = Other Change of Unit 4 = Portability Move-in 9 = Annual Reexamination 10 = Issuance of Voucher equivalent 11 = Expiration of Voucher equivalent 12 = Reserved 2b. Correction: (check primary reason) Family income correction PHA income correction PHA income correction PHA correction (non-income) 2c. Correction: (check primary reason) Family correction (non-income) PHA income correction PHA correction (non-income) 2c. Repayment agreement? 2c. Repayment agreement? 2c. Repayment agreement? 2c. PhA use only 2c. Use if instructed by HUD 2c. PHA use only 2c.	Head	of household name	ocial Security Number	Date modified (mm/dd/yyyy)	
1a. Agency name	M٦	W Family Report U.S. Depart	tment of Housing and Urban Development	Office of Public	and Indian Housing
1b. PHA code	1.	MTW Agency			
Te Perublic Housing PR = Project-Based Assistance M = Moving to Work Other	1a.	Agency name			1a.
T = Tenant-Based Assistance	1b.	PHA code			1b.
te. Building number (Public Housing only) 1e. Building entrance number (Public Housing only) 1f. Building entrance number (Public Housing only) 1g. Unit number (Public Housing only) 2 MTW Action 2a. Type of action 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Movein 5 = Portability Movein 10 = Issuance of Voucher equivalent 15 = Void 2b. Effective date (mm/dd/yyyy) of action 2c. Correction? (Y or N) 2c. If correction: (check primary reason) Family income correction Family correction (non-income) PHA correction (non-income) 2e. Date correction transmitted (mm/dd/yyyy) 2e. Ze. Monthly amount of repayment agreement 2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement 2g. Date (mm/dd/yyyy) of admission to program 2g. Projected effective date (mm/dd/yyyy) of next reexamination 2g. Reserved 2g. FSS participation now or in last year? (Y or N) 2g. Reserved 2g. Whilly amount of repayment agreement 2g. Pray a date (mm/dd/yyyy) of a date (mm/dd/yyyy) of next reexamination 2g. Reserved 2g. Whilly amount of repayment agreement 2g. Pray a date (mm/dd/yyyy) of a date (m	1c.				1c.
11. Building entrance number (Public Housing only) 12. MTW Action 23. Type of action 1 = New Admission 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Move-in 5 = Portability Move-in 5 = Portability Move-in 5 = Portability Move-in 6 = End Participation 7 = Other Change of Unit 8 = FSS:/MTW Self-Sufficiency Only 4 = Portability Move-in 5 = Portability Move-in 5 = Portability Move-in 6 = End Participation 7 = Other Change of Unit 8 = FSS:/MTW Self-Sufficiency Only 14 = Historical Adjustment 15 = Void 15 = Void 15 = Void 16 = Standard (mm/dd/yyyy) of action 26. Correction? (Y or N) 27. Repayment agreement? (Y or N) 28. Repayment agreement? (Y or N) 29. Monthly amount of repayment agreement 29. Date (mm/dd/yyyy) of admission to program 20. Projected effective date (mm/dd/yyyy) of next reexamination 20. Reserved 21. Reserved 22. Reserved 23. Reserved 24. FSS participation now or in last year? (Y or N) 26. Reserved 27. Reserved 28. FSS participation now or in last year? (Y or N) 29. Use if instructed by HUD 29. Use if instructed by HUD 29. Use if instructed by HUD 29. PHA use only 20. PHA use only 21. PHA use only	1d.	Project number (Public Housing only)		Suffix:	: 1d.
1g. Unit number (Public Housing only) 2a. MTW Action 2a. Type of action 2 = Annual Reexamination 3 = Interim Reexamination 5 = Portability Move-in 5 = Portability Move-out 10 = Issuance of Voucher equivalent 2b. Effective date (mm/dd/yyyy) of action 2c. Correction? (Y or N) 2d. If correction (check primary reason) Family income correction Family correction (non-income) 2e. Date correction transmitted (mm/dd/yyyy) 2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement 2p. Date (mm/dd/yyyy) of admission to program 2p. Priopicted effective date (mm/dd/yyyy) of next reexamination 2p. Reserved 2p. Hause only 2p. PHA use only	1e.	Building number (Public Housing only)	, <u> </u>		1e.
2. MTW Action 2a. Type of action 1 = New Admission	1f.	Building entrance number (Public Housing	only)		
2a. Type of action 1 = New Admission 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Move-in 5 = Portability Move-out 10 = Issuance of Voucher equivalent 2b. Effective date (mm/dd/yyyy) of action 2c. Correction? (Y or N) 2c. Date correction: (check primary reason) 2 = Date correction transmitted (mm/dd/yyyy) 2 = Date (mm/dd/yyyy) of admission to program 2 = Date (mm/dd/yyyy) of admission to program 2 = Date (mm/dd/yyyy) of action 2 = Date (mm/dd/yyyy) of admission to program 3 = Projected effective date (mm/dd/yyyy) of next reexamination 3 = Family correction (non-income) 3 = Annual HQS Inspection Only 4 = Historical Adjustment 4 = Historical Adjustment 5 = Void 2 = Near vection (non-income) PHA income correction PHA correction (non-income) 2 = Date correction (non-income) 3 = Date correction (non-income) 4 = Historical Adjustment	1g.	Unit number (Public Housing only)			
1 = New Admission 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Move-in 5 = Portability Move-out 10 = Issuance of Voucher equivalent 11 = Expiration of Voucher equivalent 12 = Reserved 13 = Annual HQS Inspection Only 14 = Portability Move-out 15 = Void 16 correction: (Check primary reason) 17 = Issuance of Voucher equivalent 18 = FSC/MTW Self-Sufficiency Only 19 = Annual HQS Inspection Only 14 = Historical Adjustment 15 = Void 15 = Void 15 = Void 16 correction: (Check primary reason) 17 = Inspection (non-income) 18 = FSC/MTW Self-Sufficiency Only 19 = Annual HQS Inspection Only 10 = Issuance of Voucher equivalent 15 = Void 16 correction: (Check primary reason) 17 = Inspection (non-income) 18 = Fissing HQ Inspection Only 19 = Annual HQS Inspection Only 10 = Inspection Only 11 = Inspection Only 11 = Inspection Only 12 = Inspection Only 13 = Annual HQS Inspection Only 14 = Historical Adjustment 15 = Void	<u> </u>	MTW Action			
1 = New Admission 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Move-in 5 = Portability Move-out 10 = Issuance of Voucher equivalent 11 = Expiration of Voucher equivalent 12 = Reserved 13 = Annual HQS Inspection Only 14 = Portability Move-out 15 = Void 16 correction: (Check primary reason) 17 = Issuance of Voucher equivalent 18 = FSC/MTW Self-Sufficiency Only 19 = Annual HQS Inspection Only 14 = Historical Adjustment 15 = Void 15 = Void 15 = Void 16 correction: (Check primary reason) 17 = Inspection (non-income) 18 = FSC/MTW Self-Sufficiency Only 19 = Annual HQS Inspection Only 10 = Issuance of Voucher equivalent 15 = Void 16 correction: (Check primary reason) 17 = Inspection (non-income) 18 = Fissing HQ Inspection Only 19 = Annual HQS Inspection Only 10 = Inspection Only 11 = Inspection Only 11 = Inspection Only 12 = Inspection Only 13 = Annual HQS Inspection Only 14 = Historical Adjustment 15 = Void	 2a.	Type of action			2a.
2c. Correction? (Y or N) 2d. If correction: (check primary reason) Family income correction Family correction (non-income) PHA income correction PHA correction (non-income) 2e. Date correction transmitted (mm/dd/yyyy) 2e. 2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement \$ 2g. 2h. Date (mm/dd/yyyy) of admission to program 2h. 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2i. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2p. 2q. PHA use only 2r. PHA use only 2s. PHA use only 2s. PHA use only 2s.		 2 = Annual Reexamination 3 = Interim Reexamination 4 = Portability Move-in 7 = Other C 8 = FSS/M⁻ 9 = Annual 	Change of Unit equivalent 12 TW Self-Sufficiency Only Reexamination Searching 13 = Annual H 14 = Historica	= Reserved IQS Inspection Only	
2d. If correction: (check primary reason) Family income correction PHA income correction Family correction (non-income) PHA correction (non-income) 2e. Date correction transmitted (mm/dd/yyyy) 2e. 2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement \$ 2g. All Date (mm/dd/yyyy) of admission to program 2h. Date (mm/dd/yyyy) of admission to program 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2p. 2q. PHA use only 2r. PHA use only 2s. PHA use only 2s. PHA use only 2s. PHA use only 2s. PHA use only	2b.	Effective date (mm/dd/yyyy) of action			2b.
Family correction (non-income) PHA correction (non-income) 2e. Date correction transmitted (mm/dd/yyyy) 2e. 2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement \$2g. Monthly amount of repayment agreement 2h. Date (mm/dd/yyyy) of admission to program 2h. Projected effective date (mm/dd/yyyy) of next reexamination 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2p. 2q. PHA use only 2r. PHA use only 2r. PHA use only 2s. PHA use only 2s. PHA use only 2s. PHA use only	2c.	Correction? (Y or N)			2c.
2f. Repayment agreement? (Y or N) 2g. Monthly amount of repayment agreement \$ 2g. 2h. Date (mm/dd/yyyy) of admission to program 2h. Projected effective date (mm/dd/yyyy) of next reexamination 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2s. 2t. PHA use only 2t.	2d.	If correction: (check primary reason)		\vdash	
2g. Monthly amount of repayment agreement \$ 2g. 2h. Date (mm/dd/yyyy) of admission to program 2h. 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2i. 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2k. 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2m. 2n. Reserved 2p. Use if instructed by HUD 2p. 2q. PHA use only 2q. 2r. PHA use only 2r. 2s. PHA use only 2s. 2t. PHA use only 2t.	2e.	Date correction transmitted (mm/dd/yyyy)			2e.
2h. Date (mm/dd/yyyy) of admission to program 2i. Projected effective date (mm/dd/yyyy) of next reexamination 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2t. PHA use only 2t. PHA use only 2t.	2f.	Repayment agreement? (Y or N)			2f.
2i. Projected effective date (mm/dd/yyyy) of next reexamination 2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2t. PHA use only 2t. PHA use only	2g.	Monthly amount of repayment agreement			\$ 2g.
2j. Reserved 2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2t. PHA use only 2t. PHA use only 2t. PHA use only	2h.	Date (mm/dd/yyyy) of admission to progra	m		2h.
2k. FSS participation now or in last year? (Y or N) 2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2t. PHA use only 2t. PHA use only	2i.	Projected effective date (mm/dd/yyyy) of ne	ext reexamination		2i.
2m. MTW self-sufficiency program participation now or in last year? (Y or N) 2n. Reserved 2p. Use if instructed by HUD 2q. PHA use only 2r. PHA use only 2s. PHA use only 2t. PHA use only 2t. PHA use only 2t. PHA use only	2j.	Reserved			
2n. Reserved 2p. Use if instructed by HUD 2p. 2q. PHA use only 2q. 2r. PHA use only 2r. 2s. PHA use only 2s. 2t. PHA use only 2t.	2k.	FSS participation now or in last year? (Y o	or N)		2k.
2p. Use if instructed by HUD 2p. 2q. PHA use only 2q. 2r. PHA use only 2r. 2s. PHA use only 2s. 2t. PHA use only 2t.	2m.	MTW self-sufficiency program participation	n now or in last year? (Y or N)		2m.
2q. PHA use only 2q. 2r. PHA use only 2r. 2s. PHA use only 2s. 2t. PHA use only 2t.	2n.	Reserved			
2r. PHA use only 2r. 2s. PHA use only 2s. 2t. PHA use only 2t.	2p.	Use if instructed by HUD			2p.
2s. PHA use only 2s. 2t. PHA use only 2t.	2q.	PHA use only			2q.
2t. PHA use only 2t.	2r.	PHA use only			2r.
	2s.	PHA use only			2s.
2u. PHA use only2u.	2t.	PHA use only			2t.
	2u.	PHA use only			2u.

3.	MTW Ho	useho	ld												
3a.	Head of Household	3b. Last	Name & Sr, Jr. etc.			3c. First nar	me		3d. MI	3e. [Date of b	oirth		3f. Age on effective date of action =2 3m. Ethnicity uirement? (Public Housing) 3f. Age on effective date of action =2 3m. Ethnicity =4 3m. Ethnicity =4 3m. Ethnicity uirement? (Public Housing)	
	Member number 01	3g. Sex	3h. Relation	3i. Citi	zenshi	p	3j. Disability (Y/N))	3k. Race			=1 =3 =5		_	3m. Ethnicity
		3n. Socia	al Security Number	3p. A	lien Registrati -	on Number				rvice re	ce requirement? (Public Housing				
		3r. Total	l years of school (0-25)											
3a.	Member number	3b. Last Name & Sr, Jr. etc.				3c. First nar	me		3d. MI	Зе. Г	Date of b	oirth			
	02	3g. Sex 3h. Relation 3i. Citizenship					3j. Disability (Y/N))				=1 =3 =5		_	3m. Ethnicity
		3n. Socia	al Security Number		3p. A	lien Registrati -	on Number	3q. Meeting community service requirement? (Public Housing only)							
		3r. Total	l years of school (0-25)											
3a.	Member number	3b. Last	Name & Sr, Jr. etc.			3c. First nar	me		3d. MI						
	03	3g. Sex	3h. Relation	3i. Citi	zenshi	p	3j. Disability (Y/N)	/N) 3k. Race				=1 =3 =5			3m. Ethnicity
		3n. Socia	al Security Number		3p. A	lien Registrati	on Number	3	g. Meeting c only)	отти	ınity se		quiren	nent? (Pub	olic Housing
		3r. Total	l years of school (0-25)											
3a.	Member number	3b. Last	Name & Sr, Jr. etc.			3c. First nar	me		3d. MI	3e. [Date of b	oirth			
	04	3g. Sex	3h. Relation	3i. Citi	zenship	p	3j. Disability (Y/N)	3k. Race =1 =3 =5						3m. Ethnicity	
		3n. Socia	al Security Number		3p. A	lien Registrati	on Number	3	3q. Meeting community service requirement? (Public Housing only)						
		3r. Total	l years of school (0-25)											
3a.	Member number 05	3b. Last	Name & Sr, Jr. etc.			3c. First nar	me		3d. MI	3e. [Date of b	oirth			
	05	3g. Sex	3h. Relation	3i. Citi	zenship	p	3j. Disability (Y/N))	3k. Race			=1 =3 =5			3m. Ethnicity
		3n. Socia	al Security Number		3p. A	lien Registrati	on Number	3	q. Meeting c only)	ommu	ınity se	rvice re	quiren	nent? (Puk	olic Housing
		3r. Total	l years of school (0-25)											
Cod	des:														
Codes: 3h. Relation: H = head S = spouse K = co-head F = foster child/foster adult Y = other youth under 18 E = full-time student 18+ L = live-in aide A = other adult							3k. Race: 1 = White 2 = Black/African A 3 = American India 4 = Asian 5 = Native Hawaiia	an/A	Alaska Native	slande	Э Г		1 = 2 = 1 = 2 = 3 = 4 = 1	•	anic or Latino

Social Security Number

Date modified (mm/dd/yyyy)

Head of household name

Head of household	name		So	cial Security Num		Date modified (mm/dd/yyyy)								
3a. Member number	3b. Last	Name & Sr, Jr. etc.		3c. First na	ame		3d. MI	3e. [Date of b	oirth			on effective of action	
	3g. Sex	3h. Relation	3i. Citiz	enship	3j. Disability (Y/N)	3k. Race	<u> </u>		=1		=2	3m. Ethnicity	
										=3		=4		
	3n Socia	A Security Number		3p. Alien Registrat	tion Number	30	Meeting	commi	ınity saı	=5	quirem	ont? (Pul	l blic Housing	
	311. 30018	a Security Number		A-	ion number	34	only)	comm	iiiily sei	vice re	quirein	entr (Fut	one mousing	
	3r. Total	l years of school (0-25)											
3a. Member number	3b. Last	Name & Sr, Jr. etc.		3c. First na	ame		3d. MI	3e. [Date of b	oirth		3f. Age on effective date of action		
	3g. Sex	3h. Relation	3i. Citiz	enship	3j. Disability (Y/N)	3k. Race)		=1 =3		=2 =4	3m. Ethnicity	
										=5				
	3n. Socia	al Security Number		3p. Alien Registrat A-	tion Number	3q	. Meeting only)	commi	ınity seı	rvice re	quirem	ent? (Pul	olic Housing	
	3r. Total	l years of school (0-25)											
3a. Member number	3b. Last	Name & Sr, Jr. etc.		3c. First na	ame		3d. MI	3e. [Date of b	oirth			on effective of action	
	3g. Sex	3h. Relation	3i. Citiz	enship	3j. Disability (Y/N)	3k. Race	;		=1		=2	3m. Ethnicity	
										=3 =5		=4		
	3n. Socia	al Security Number		3p. Alien Registrat	tion Number	3q	Bq. Meeting community service only)				rice requirement? (Public Housing			
	3r. Total	l years of school (0-25)											
3a. Member number	3b. Last	Name & Sr, Jr. etc.		3c. First na	ame		3d. MI	3e. [Date of b	oirth			on effective of action	
	3g. Sex	3h. Relation	3i. Citiz	enship	3j. Disability (Y/N)	3k. Race =1 =3 =5					=2 =4	3m. Ethnicity	
	3n. Socia	I Security Number		3p. Alien Registrat	I tion Number	3q	q. Meeting community service requirement? (Public Housing only)					l blic Housing		
	3r. Total	l years of school (0-25)											
	2h Loot	Name & Sr, Jr. etc.		3c. First na			3d. MI	20. [Date of b	irth		Of Ago	on effective	
3a. Member number	SD. Last	name & Si, Si. etc.		Sc. Filst lie	une		Su. IVII	Je. 1	Jale of b	on u i			of action	
	3g. Sex	3h. Relation	3i. Citiz	enship	3j. Disability (Y/N)	3k. Race)		=1		=2	3m. Ethnicity	
			_							=5				
	3n. Socia	al Security Number		3p. Alien Registrat A-	tion Number	3q	. Meeting only)	сотти	ınity seı	rvice re	quirem	ent? (Pul	olic Housing	
	3r. Total	l years of school (0-25)											
Codes:														
3h. Relation:		3i. Citizer			3k. Race:							Ethnicity:		
H = head S = spouse		EC = eligi EN = eligi			1 = White 2 = Black/African	Amer	rican					Hispanic Not Hispa	or Latino anic or Latino	
K = co-head F = foster child/fost	ter adult	IN = ineli PV = pen			3 = American India 4 = Asian	an/Al	aska Native	е				•	nity Service	
Y = other youth und	der 18	ı v = pen	anig verille	adon	5 = Native Hawaii	an/Ot	ther Pacific	slande	er		1 =	yes	my dervide	
E = full-time studen L = live-in aide	nt 18+											no pending		
A = other adult												exception	1	
												n/a		

Head of household name	Social Security Number	Date modified (mm/dd/yyyy)
3t. Total number in household			3t.
3u. Family subsidy status under noncitize	n rule: C = Qualified for continuation of f E = Eligible for full assistance F = Eligible for full assistance pe P = Prorated assistance		3u.
3v. Effective date (mm/dd/yyyy) if qualifie	d for continuation of full assistance		3v.
3w. If new head of household, former head	d of household's SSN		3w.
4. MTW Family Background a	t Admission		
4a. Date (mm/dd/yyyy) entered waiting lis	t		4a.
4b. ZIP code before admission			4b.
4c. Homeless at admission? (Y or N)			4c.
4d. Reserved			
4e. Continuously assisted under the 1937	Housing Act? (head of household o	nly) (Y or N)	4e.
4f. Reserved			
5. MTW Unit To Be Occupied	on Effective Date of Actio	n	
5a. Unit address			
Number and street			Apt.
City	State	Zip code (+4)	
5b. Is mailing address same as unit addre	ess? (Y or N) (If yes, skip to 5d)		5b.
5c. Family's mailing address			,
Number and street			Apt.
City	State	Zip code (+4)	,
5d. Number of bedrooms in unit			5d.
5e. Has the PHA identified this unit as an	accessible unit? (Public Housing on	(Y or N)	5e.
5f. Has the family requested accessibility	features? (Public Housing only)		5f.
(Y or N) (If no, skip to next section)			
5g. Has the family received requested acc	cessibility features? (Public Housing	only)	
a. Yes, fully b. Yes, partially		pending (can be checked in nation with b. or c.)	
 Date (mm/dd/yyyy) unit last passed H except Homeownership) 	QS inspection (Tenant-Based or Pro	ject-Based Assistance only,	5h.
5i. Date (mm/dd/yyyy) of last annual HQ: Homeownership)	S inspection (Tenant-Based or Project	ct-Based Assistance only, except	5i.
5j. Year (yyyy) unit was built (Tenant-Bas	sed or Project-Based Assistance only	·)	5j.
5k. Structure type (check only one) (Tena	nt-Based or Project-Based Assistand	e only)	·
Single family detached S	Semi-detached Rowh	ouse/townhouse	
Low-rise	High rise with elevator Manu	factured home	
Note: The numbering for the following sections start. Sections with these numbers were excluded to numerical labels.			

Head of household name	Social Security Number	Date modified (mm/dd/yyyy)
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18.MTW Asset Income

18a. Family member name	No.	18b.Type of asset (PHA use only)	18c.Calculation (PHA use only)	18d. Cash value of asset	18e.Anticipated Income		
				\$	\$		
				\$	\$		
				\$	\$		
				\$	\$		
				\$	\$		
				\$	\$		
				\$	\$		
				\$	\$		
18f, 18g Column totals				\$ 18f.	\$ 180	ı.	
18h. Asset income ex	cluded					\$	18h.
18i. Reserved	•	_	_		_		
18j. Final asset incor	ne					\$	18j.

19.MTW Income

19a. Family member name	No.	19b. Income code	19c. Calculation (PHA use only)	19d. Dollars per year				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
				\$				
19e. Column total				\$ 19e.			-	
19f. Income exclusio	ns				\$	19f.		
19g. Income after inc	ome ex	clusions: 19e mir	nus 19f		\$	19g.		
19h. Total annual inc	ome: 1	8j + 19g					\$	19h.
19i. Deductions					\$	19i.		
19j. Adjusted annual	incom	e: 19h minus 19i			•		\$	19j.
19b. Income Code							•	

19b.	Income	Code

Р	=	pension
В	=	own business
SS	=	social security
М	=	military pay

S = SSI F = Federal wage T = TANF HA = PHA wage

 $\begin{array}{lll} G &=& general \ assistance \\ W &=& \ other \ wage \\ C &=& \ child \ support \\ U &=& \ unemployment \ benefits \end{array}$

I = Indian trust/per capita N = other nonwage sources
E = medical reimbursement
IW = annual imputed welfare

income
X = MTW income

Head of household name	Social Security Number	Date modified (mm/dd/yyyy)	
20. MTW Public Housing	J		
20a. Type of rent	Income-based	ased Flat	
20b. Tenant rent		\$ 2	20b.
20c. Mixed family tenant rent		\$ 2	20c.
20d. Utility allowance/estimate		\$ 2	20d.
20e. Is this a ceiling rent? (Y or N		20f.	
20f. Reserved			
21. MTW Tenant-Based	or Project-Based Assistance		
21a. Indicate if flat subsidy or inco	me-based rent (F = Flat subsidy I = Incor	me-based)	21a
21b. Number of bedrooms on vou	cher equivalent	2	21b
21c. Is family now moving to this	unit? (Y or N)	2	21c
21d. Did family move into your Ph	IA jurisdiction under portability? (Y or N) (if n	no, skip to 21g)	21d
21e. Cost billed per month (put 0	f absorbed)	2	21e
21f. PHA code billed			21f
21g. Owner name		2	21g
21h. Owner TIN/SSN		2	21h
21i. Rent to owner		\$	21i
21j. Utility allowance/estimate		\$	21j
21k. Gross rent of unit		\$	21k
21m.Flat subsidy amount, if any		\$ 2	21m
21n. Tenant rent to owner		\$ 2	21n
21p. Mixed family tenant rent to or	wner	\$ 2	21p
21q. Is this a ceiling rent? (Y or N	l)	2	21q
21r. Reserved		-	

22. MTW Homeownership

	•			
22a.	Indicate if flat subsidy or income-based homeownership payment (F = Flat subsidy I = Income-based)	22a.		
22b.	Is family now moving to this home? (Y or N)	22b.		
22c.	Date (mm/dd/yyyy) of initial HQS inspection	22c.		
22d.	Did family move into your PHA jurisdiction under portability? (Y or N) (if no, skip to 22g)	22d.		
22e.	Cost billed per month (put 0 if absorbed)	22e.		
22f.	PHA code billed	22f.		
22g.	Monthly homeownership payment (PITI & MIP if applicable)	\$ 22g.		
22h.	Utility allowance/estimate	\$ 22h.		
22i.	Other monthly allowance(s), if any	\$ 22i.		
22j.	Gross homeownership expense	\$ 22j.		
22k.	Flat subsidy amount	\$ 22k.		
22m.	Total family share		\$	22m.
22n.	Mixed family total family share		\$	22n.
22p.	Is this a ceiling family share? (Y or N)			22p.
22q.	Reserved		•	

23b. Report category (check no more than one) Enrollment Progress Exit 23c. Effective date (mm/dd/yyyy) of action 23d. PHA code of PHA administering FSS contract 23e. Reserved	
23c. Effective date (mm/dd/yyyy) of action 23d. PHA code of PHA administering FSS contract 23e. Reserved	
23d. PHA code of PHA administering FSS contract 23e. Reserved	
23e. Reserved	23c.
	23d.
23f. Reserved	
23g. Reserved	
23h. General Information	
(1) Current employment status of head of household. Check the box to indicate the head of household's employment status at the time Addendum completed. Full-time (32 hours per week or more) Part-time Not employed	
(2) Date (mm/dd/yyyy) current employment began 23l	23h(2).
(3) Benefits in current employment: (check all that apply) Health Retirement account Other	
(4) Reserved 23l	23h(4).
(5) Assistance received by the family: (check all that apply) TANF Income Assistance? Medicaid/Children's Health Insurance Program? General Assistance? Food Stamps? Earned Income Tax Credit?	
(6) Number of children receiving child care services 23l	23h(6).
23i. Family services table	
(1) Need (2) Needs Met Through (3) Service Provider Program (Y or N)	
Education/Training	
GED	
High school	
Post secondary Vocational/job training	
Job search/job placement	
Job retention	
Transportation	
Health services	
Alcohol and other drug abuse prevention	
Services Montoring	
Mentoring Homeownership counseling	
Individual Development Account (IDA)	
Child care	
None	
23i (3) Service Provider Codes P = PHA	

Social Security Number

Date modified (mm/dd/yyyy)

Head of household name

Head of household name		Social Security Number Date modified (mm/dd/yyyy)			
23j.	Self-Sufficiency Contract Information				
	(1) Initial start date (mm/yyyy) of contract of participation				23j(1).
	(2) Initial end date (mm/yyyy) of contract of participation				23j(2).
	(3) Contract date (mm/yyyy) extended to (if applicable)				23j(3).
	(4) Number of family members with Individual Training and Services Plan				23j(4).
	(5) Did the family receive selection preference because of an FSS related service program participation? (FSS enrollment report only) (Y or N)				
23k.	Escrow Account Information				
	(1) Current account monthly credit			\$	23k(1).
	(2) Current account balance			\$	23k(2).
	(3) Account amount disbursed to the family (cumulative as of end of reporting period)		\$	23k(3).	
23m.	23m. Exit Information (complete only for Exit Report)				
	(1) Did family complete FSS contract of participation or MTW self-sufficiency program? (Y or N)				
	(2) If (1) is Yes, did family move to homeownership? (Y or N)				
	(3) If (1) is No, reason for exit: Left voluntarily Asked to leave program Portable Contract expired but family did not fulfill				